



# PUBLIC NOTICE COMPLAINT

**DO NOT WRITE IN THIS SPACE:**    **Case No.:** \_\_\_\_\_    **Date Filed:** \_\_\_\_\_

**INSTRUCTIONS:** A public notice complaint must be filed in the appropriate regional office of the Public Employment Relations Board (see PERB Regulation 32075). Fill in the information requested in each section of this form. If more space is needed for any item, attach additional sheets and number items accordingly.

1. TYPE OF COMPLAINT

This complaint alleges a violation of:

Government Code section 3523 (Ralph C. Dills Act)

Government Code section 3547 or      3547.5 (EERA - Educational Employment Relations Act)

Government Code section 3595 (HEERA - Higher Education Employer-Employee Relations Act)

2. COMPLAINANT

Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: (\_\_\_\_\_) \_\_\_\_\_ Ext. \_\_\_\_\_

If alleging a violation of EERA, check all of the following which apply:

Complainant is a resident of the school district involved.

Complainant is a parent or guardian of a student in the school district.

Complainant is an adult student in the district.

3. EMPLOYER

Name of Employer: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: (\_\_\_\_\_) \_\_\_\_\_ Ext. \_\_\_\_\_

Employer's Agent to be contacted:

Name: \_\_\_\_\_

Title: \_\_\_\_\_ Telephone: (\_\_\_\_\_) \_\_\_\_\_ Ext. \_\_\_\_\_

4. EXCLUSIVE REPRESENTATIVE OF THE UNIT COVERED BY THE COMPLAINT

Name of Employee Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: (\_\_\_\_\_) \_\_\_\_\_ Ext. \_\_\_\_\_

Exclusive Representative's Agent to be contacted:

Name: \_\_\_\_\_

Title: \_\_\_\_\_ Telephone: (\_\_\_\_\_) \_\_\_\_\_ Ext. \_\_\_\_\_

5. UNIT COVERED BY THE COMPLAINT (Name (or description) of unit)

## 6. COMPLAINT FILED AGAINST (Check One Only)

### A. Employer

### B. Exclusive Representative

## 7. EFFORTS TO RESOLVE THE COMPLAINT

Does the employer have a procedure under which this complaint could be resolved?

Yes

No

State what efforts have been made to resolve this complaint at the employer level, including dates when those efforts began and the current status of attempts to resolve this complaint:

Is there any litigation pending concerning the violations alleged in the complaint?

Yes

No

If yes, please explain

## 8. STATEMENT OF COMPLAINT

The Complainant hereby alleges that the above-named \_\_\_\_\_ employer/ \_\_\_\_\_ exclusive representative has violated or is in violation of the public notice provisions of the statute.

The specific subsection(s) of the Government Code alleged to have been violated is/are ( ), ( ), ( ), ( ), ( ).

The date(s) the alleged violation(s) occurred is/are: \_\_\_\_\_.

Provide a clear and concise statement of the *facts* alleged to constitute a violation of the subsection(s) cited above, including, where known, the time and place of each incident which forms the basis of this complaint, and the name and capacity of each person involved. This must be a statement of facts that support your claim, not conclusions.

## DECLARATION

I declare under penalty of perjury that I have read the above and that the statements herein are true and complete to the best of my knowledge and belief.

Signature of Complainant: \_\_\_\_\_ Date: \_\_\_\_\_

Los Angeles Regional Office  
3530 Wilshire Blvd., Suite 1435  
Los Angeles, CA 90010-2334  
(213) 736-3127

Sacramento Regional Office  
1031 18<sup>th</sup> Street  
Sacramento, CA 95814-4174  
(916) 322-3198

San Francisco Regional Office  
1330 Broadway, Suite 1532  
Oakland, CA 94612-2514  
(510) 622-1016